

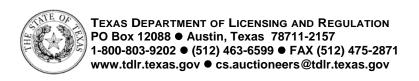
TEXAS DEPARTMENT OF LICENSING AND REGULATION PO Box 12157 ● Austin, Texas 78711-2157 1-800-803-9202 ● (512) 463-6599 ● FAX (512) 475-2871 www.tdlr.texas.gov ● cs.auctioneers@tdlr.texas.gov

AUCTIONEER REQUEST FOR A CHANGE IN LICENSE STATUS FORM INSTRUCTIONS

The application must be completed and signed by the applicant. An application is not considered complete and will not be processed until all required items have been submitted. All information provided must be typed or printed in <u>black ink</u>. Attachments must be submitted on separate pieces of single-sided, 8½" x 11" paper. Use a paperclip to fasten all pages together, with the check or money order on top. **Do not use staples**.

DOCUMENTS SUBMITTED WITH YOUR APPLICATION WILL NOT BE RETURNED. KEEP A COPY OF YOUR COMPLETED APPLICATION, AND ALL ATTACHMENTS.

- CHANGE IN STATUS Check the box to indicate whether you want to set your license to inactive or active. If you
 want to activate your license, you must complete the required continuing education (CE) before your license can be
 activated. If you want to inactivate your license, you are still required to renew your license every renewal period.
- 2. NAME Write your legal name in the spaces provided. (Last, First, Middle Initial, Suffix) Examples of a suffix include Jr., Sr., and III. (Mr. is not a suffix.)
- 3. LICENSE NUMBER AND EXPIRATION DATE Write your auctioneer license number and expiration date.
- 4. MAILING ADDRESS Write your current mailing address. This is the address where we will send you mail. This address can be a post office box. You can add the zip plus-4 to help the postal service deliver mail more efficiently and accurately. Always keep your mailing address current with TDLR. A license renewal notice will be mailed to your address of record before the date your license will expire.
- 5. <u>PHONE NUMBER</u> Write a telephone number, including the area code, where we can reach you during the day. This may be your office phone number where we can leave a message.
- E-MAIL ADDDRESS Write your e-mail address. TDLR will use your e-mail address only for the purpose of communicating with you electronically in a manner which protects your e-mail address from disclosure under the Public Information Act.
- 7. STATEMENT OF APPLICANT Carefully read the statement of applicant before you date and sign your application.



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FOR FINANCIAL SERVICES USE ONLY

DO NOT WRITE ABOVE THIS LINE ALL INFORMATION MUST BE TYPED OR PRINTED IN BLACK INK			
☐ I would like to put my license on inactive st while it is on inactive status.	tatus. (no fee required) I am awa	re that my license mu	ıst be renewed
☐ I would like to activate my license. I unders license can be activated.(\$25)	stand that I must complete my con	itinuing education hou	urs before my
2. Name:			
Last	First	Middle Initial	Suffix (JR, SR, III)
3. License Number and Expiration Date:			
License Number		ation Date	
LICEUSE INUITIDES		ion Date	
Number, Street Name, Apartment Number	Chata		7.01
5. Phone Number:	6. E-Mail Address:		Zip Code
5. Frione Number.	O. E-Mail Addiess.		
Area Code Phone Number	(Ex: johndoe@aol.com) See instr	ruction sheet for disclosure inf	ormation
7. STATEME	ENT OF APPLICANT		
I certify that I am in compliance with all applicable Texas Administrative Code, Chapters 60 and 67. I result in revocation of the license I am requesting	I understand that providing false in	nformation on this app	
Date Signed	Applicant Signature		